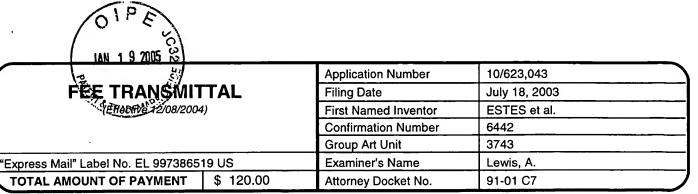
PETITION FOR EXTENSION OF TIME UNDER 37 C.F.R. § 1.136(a)			Atty. Docket No. 91-01 C7					
Inventor(s): ESTES et al.								
JAN 1 9 2005 32	Appln. No.: 10/623,043	Conf. No.: 6442						
	Filed: July 18, 2003							
	Title: Sleep Apnea Treatment Apparatus							
	Examiner: Lewis, A.	Group Art Unit: 3743						
	Express Mail Label No. (if applicable): EL 997386519 US							
This is a request under the provisions of 37 C.F.R. § 1.136(a) to extend the period for filing a response in the above identified application. The requested extension and appropriate non-small-entity fee from the original due date of December 21 , 2004 are as follows: (check time period desired)								
One month - 37 C.F	.R. § 1.17(a)(1)	\$	120.00					
Two months - 37 C.	F.R. § 1.17(a)(2)	\$						
Three months - 37 C	C.F.R. § 1.17(a)(3)	\$						
Four months - 37 C.	F.R. § 1.17(a)(4)	\$						
Five months -37 C.F	F.R. § 1.17(a)(5)	\$						
Less the previous extension fee of \$ paid in papers dated, which were filed in the present application subsequent to the original due date.								
Fee Transmittal For	Fee Transmittal Form Attached. (Submit original and a duplicate for fee processing)							
A check covering the amount due of \$ is enclosed (check no).								
	The Commissioner has already been authorized to charge fees in this application to Deposit Account No. 50-0558.							
	The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-0558. A duplicate copy of this sheet is enclosed.							
I am the assignee of record of the entire interest.								
applicant.								
<u> </u>	attorney or agent of record.							
attorney or agent acting under 37 C.F.R. § 1.34(a), Registration No. 35,174								
January 19, 2005	Mus	lack	W. Hon					
Date Signature *								
			hael W. Haas					
		T	yped Name					



METHOD OF PAYMENT	FEE CALCULATION (continued)							
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:	3. APPLICATION SIZE FEE							
Deposit	If the specification and drawings exceed 100 sheets of paper, the application size fee due							
Account 50-0558 Number	is \$250 for each additional 50 sheets or fraction thereof. See 35 U.S. C. § 41(a)(1)(G) and 37 C.F.R. § 1.16(s).							
Deposit Account Respironics, Inc.	<u>Total</u> Sheets	Ext She			of each additional Fee(\$) ction thereof	<u>Fee</u> Paid(\$)		
Name	1	00 =	/50 =		(round up to a whole number) X 250 =	0.00		
Charge any additional fee required under 37 forth in 37 C.F.R. § 1.18	4. ADDITIONAL FEES							
C.F.R. §§ 1.16, 1.17 1.19 and 1.20	Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid		
2. Payment Enclosed:	1051	130	2051	65	Surcharge - late filing fee or declaration			
Check (Check No)	1811	100	1811	100	Certificate of Correction			
FEE CALCULATION (fees effective 12/08/2004)	1812	2,520	1812	2,520	For filing a request for reexamination			
1. BASIC FILING, SEARCH, AND EXAM FEES	576	25	576	25	Additional filing receipt, duplicate or corrected due to applicant error			
(Large Entity Only)	1251	120	2251	60	Extension for response within first month	120.00		
Appin. Filing Search Exam Type Fee(\$) Fee(\$) Fees Paid	1252	450	2252	225	Extension for response within second month			
Utility 300 500 200	1253	1,020	2253	510	Extension for response within third month			
Design 200 100 130	1254	1,590	2254	795	Extension for response within fourth month			
Plant 200 300 160	1255	2,160	2255	1,080	Extension for response within fifth month			
Reissue 300 500 600	1401	500	2401	250	Notice of Appeal	1		
Provisional 200 0 0	1402	500	2402	250	Filing a brief in support of an appeal			
	1403	1,000	2403	500	Request for oral hearing			
SUBTOTAL (1) \$ 0.00	1452	500	2452	250	Petition to revive unavoidably abandoned application			
2. CLAIMS Extra Fee from Claims Below Fee Paid	1453	1,500	2453	750	Petition to revive unintentionally abandoned application			
Total Claims * x 50 =	1501	1,400	2501	700	Utility issue fee (or reissue)			
Ind. Claims * x 200 =	1502	800	2502	400	Design issue fee			
Multiple Dependent Claims add 360 =	1814	130	2814	65	Statutory Disclaimer			
* Enter Highest Number Previous Paid For	1460	130	1460	130	Petitions to the Director			
Large Entity Small Entity Fee Description Fee (\$)	1807	50	1807	50	Petitions related to provisional applications			
1202 50 2202 25 Claims in excess of 20	1806	180	1806	180	Submission of Information Disclosure Stmt			
1201 200 2201 100 Independent claims in excess of 3	8021	40	8021	40	Recording each patent assignment per property (times number of property)			
1203 360 2203 180 Multiple dependent claim	1801	790	2801	395	Request for Continued Examination			
1204 200 2204 100 Reissue independent claims over original patent	1504	300	1504	300	Publication Fee			
1205 50 2205 25 Reissue claims in excess of 20 and over original patent	Other Fee (specify)							
SUBTOTAL (2) \$ 0.00					SUBTOTAL (3)	120.00		
SUBMITTED BY								